KO01352

## SUMMARY OF 510(K) SAFETY AND EFFECTIVENESS REAADS IgG Anti-Prothrombin Semi-Quantitative Test Kit February 06, 2001

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92.

The REAADS IgG Anti-Prothrombin Semi-Quantitative Test Kit is compared to a legally marketed predicate device and a substantial equivalence claim made. The predicate device is REAADS IgG anti-Beta 2 Glycoprotein I (K982391) currently manufactured and marketed by Corgenix, Inc., Westminster, Colorado.

The REAADS IgG Anti-Prothrombin Semi-Quantitative Test Kit is an enzyme-linked immunosorbent assay (ELISA), utilizing the 96-microwell plate format, similar to the predicate device. Diluted serum samples, calibrator sera, and controls are incubated in microwells coated with purified human prothrombin. Incubation allows the anti-prothrombin antibodies present in the samples to react with the immobilized antigen. After the removal of unbound serum proteins by washing, antibodies specific for human IgG, labeled with horseradish peroxidase (HRP), are added forming complexes with the prothrombin bound antibodies. Following another washing step, the bound enzyme-antibody conjugate is assayed by the addition of a single solution containing tetramethlybenzidine (TMB) and hydrogen peroxide (H<sub>2</sub>O<sub>2</sub>) as the chromogenic substrate. The intensity of the color generated is proportional to the serum concentration of anti-prothrombin antibodies. Optical density is read spectrophotometrically at 450nm. The total incubation time (at room temperature) of the assay is 40 minutes. The assay makes use of a single point calibrator to measure the amount of IgG anti-prothrombin antibodies in patient samples.

The intended use of the device is for the detection and semi-quantitation of IgG anti-prothrombin (aPT) antibodies in individuals with systemic lupus erythematosus (SLE) and lupus-like disorders (e.g., antiphospholipid syndrome). Several plasma proteins have been identified as antiphospholipid cofactors. Beta 2 Glycoprotein I and prothrombin are the most common and extensively studied cofactors. Antibodies to prothrombin have been reported in patients with antiphospolipid syndrome (APS) and are proposed to be included in the serologic evaluation of antiphospholipid antibodies. Elevated levels of these antibodies are associated with an increased risk for APS, characterized by recurrent thrombosis, thrombocytopenia and/or fetal loss.

Performance indicates that REAADS IgG Anti-Prothrombin Semi-Quantitative Test Kit and the REAADS IgG anti-Beta 2 Glycoprotein I ELISA are equivalent. In-house studies indicate a clinical specificity of 92.5% and 98% for IgG Anti-Prothrombin antibodies in serum and plasma, respectively. Studies indicate a sensitivity of 16.7% for unselected SLE patients and 18% for lupus anticoagulant patients for IgG Anti-Prothrombin antibodies. In-house studies indicate a clinical sensitivity of 100% and 97% for IgG B2GPI antibodies in serum and plasma, respectively. Studies indicate a sensitivity of 25% for unselected SLE patients and 27.9% for lupus anticoagulant patients for IgG B2GPI antibodies. Although differences between the assays are observed, in general, the performance characteristics are comparable. These results are also in compliance with those in published literature for antiphospholipid syndrome detection. The clinical studies performed demonstrate that the REAADS IgG Anti-Prothrombin Semi-Quantitative Test Kit is safe and effective.

Name Depte 2001FEB06

Nanci Dexter
Director, Quality Assurance and Regulatory Affairs

Date



Food and Drug Administration 2098 Gaither Road Rockville MD 20850

## APR - 9 2001

Ms. Nanci Dexter Director, Quality Assurance and Regulatory Affairs Corgenix, Inc. 12061 Tejon Street Westminster, CO 80234

Re: 510(k) Number: K001352

Trade/Device Name: REAADS IgG Anti-Prothrombin Semi-Quantitative Test Kit

Regulation Number: 866.5820

Regulatory Class: II Product Code: DHC Dated: February 6, 2001 Received: February 8, 2001

## Dear Ms. Dexter:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4588. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

Steven I. Gutman, M.D., M.B.A.

Director

Division of Clinical Laboratory Devices

Steven Butman

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

## **Indications for Use Statement**

510(k) Number:	<u>K001352</u>	
Device Name: REA	ADS IgG Anti-Prothrombin	Semi-Quantitative Test Ki

Indications for Use:

The REAADS IgG Anti-Prothrombin Semi-Quantitative Test Kit is an in vitro diagnostic assay for the detection and semi-quantitation of IgG anti-prothrombin (aPT) antibodies in individuals with systemic lupus erythematosus (SLE) and lupus-like disorders (e.g., antiphospholipid syndrome).

The REAADS IgA Anti-Phosphatidylserine Semi-Quantitative Test Kit is intended to be used by clinical (hospital and reference) laboratories.

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Concurrence of CDRH, Office of Device Evaluation (ODE)